						Application or Docket Number					
	PATENT APPLI	Effective Janua		•	ORD		762	: : (3)	850	, ,	
CLAIMS AS FILED - PART I (Golumn 1) (Column 2)						LEN	TITY	OR.	SMALL		
TOTAL CLAIMS		14			RA	TE	FEE	1	BATE	770	
FOR		NUMBER	FILED	NUMBER EXTRA	BASI	FEE	375.00	OF	ASIC CE	50.	
TOTAL CHARGEABLE CLAIMS		LAIMS S mi	nus 20= *	0	X\$	9=	- * *	OF	X∜18∘		
INDEPENDENT CLAIMS		7/m	inus 3 = *	D	\X4			1 1	X84 =		
Μl	ULTIPLE DEPENDENT	CLAIM PRESENT	RESENT		1 —	-+		OR		1	
*	the difference in colu	imn 1 is less than z	less than zero, enter "0" in column 2			0==		OF	+130≈ ∴ 		
CLAIMS AS AMENDED - PART II						AL.	. : A.Z.	QR.	TOTAL		
(Column 1) (Column 2) (Column 3)						ALL E	NTITY	OR	SMALL		
AMENDMENT A	REM. AF	AIMS AINING TER JOMENT	HIGHE NUMBE PREVIOL PAID FO	ST PRESENT JSLY EXTRA	RA	ĪΕ	ADDI- FEE		RATE	110) 5 10) 5	
	Total * 3	O. Minus	# 2	0 = -	×\$	9=	,	QR	X\$18=		
	Independent	3 Minus	***	3 :	X4:	? 	en metrological	ов	X34±		
	FIRST PRESENTATIO	N OF MULTIPLE DE	PENDENT (CLAIM]	7			.000		
			•		+14	OTAL	_x_s_s	OR	+230≈ 101ÅL		
	(Column 1) (Column 2) (Column 3)					FEE	ETER.	OB,	ODI), FEE		
AMENDMENT B	CI. REM. AF	AIMS AINING TER IDMENT	HIGHE NUMBE PREVIOL PAID FO	ST ER PRESENT USLY EXTRA	RAT		ADDI- TONAL FEE	Brancas a	RATE	TICAL)	
	Total *	Minus	**	. =	X\$ 9)≈ '		OR T	X\$18=		
	Independent +	Minus	***	=	X42	_		011	X04=		
ㄴ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM)=		r	÷230=	1 	
						TAL		00	TI OTAT		
l,	(Column 1) (Column 2) (Column 3)					FEE L	ئىدىمىد	OB a	ODIT, FEE		
AMENDMENT C	CL REMA AF	AIMS AINING TER DMENT	HIGHES NUMBE PREVIOU PAID FO	T PRESENT	RAT		ADDI- IONAL FEE	?	RATE	7.100 TON	
NDN	Total	Minus	**	-	X\$ 9	=		OEL :	X\$18=		
AME	Independent	Minus	***	=	X42				X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					-+-		on :		- - 1:	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20,"
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3,"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

FORM PTO-875 (Rev. 12/02)

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Parent and Trademark Office, U.S. DEPARTM INT OF CC VALLE C

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ADDIT. FEE.